

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 51 OF 153  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

National Nurses United for Patient Protection

FEC IDENTIFICATION NUMBER ▼

C C00490375

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name of Payee

Outfront Media

☐ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
04 18 2016

Mailing Address

185 US Highway 46

Amount

City

Fairfield

State

NJ

Zip Code

07004

10468.00

Transaction ID : D712727

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
04 05 2016

Purpose of Expenditure

Billboard

Category/  
Type

Name of Federal Candidate

Bernie Sanders

☒ Support  
☐ Oppose

Office Sought:

☐ House

District: 00

☒ President☐ Senate

State: CA

Calendar Year-To-Date  
Per Election for Office Sought

2042683.54

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ▶

Full Name of Payee

UCLA Student Media

☐ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
04 18 2016

Mailing Address

308 Westwood Plaza, KH-118

Amount

City

Los Angeles

State

CA

Zip Code

90024

1250.00

Transaction ID : D712728

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
04 05 2016

Purpose of Expenditure

Advertising

Category/  
Type

Name of Federal Candidate

Bernie Sanders

☒ Support  
☐ Oppose

Office Sought:

☐ House

District: 00

☒ President☐ Senate

State: CA

Calendar Year-To-Date  
Per Election for Office Sought

2042683.54

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

11718.00

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Martha Kuhl

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 15 2016

Signature